



General Assembly

Amendment

February Session, 2008

LCO No. 6393

HB0570106393HDO

Offered by:

REP. SAYERS, 60th Dist.

SEN. HANDLEY, 4th Dist.

To: Subst. House Bill No. **5701**

File No. 400

Cal. No. 232

***"AN ACT CONCERNING REVISIONS TO STATUTES PERTAINING
TO THE DEPARTMENT OF PUBLIC HEALTH."***

1 In line 85, strike "permitting required" and substitute "required
2 permitting" in lieu thereof

3 In line 461, after "Aging," insert "the Connecticut Assisted Living
4 Association," and strike "Long Term Care" and substitute "Subacute
5 Care, Inc." in lieu thereof

6 Strike section 6 in its entirety and renumber the remaining sections
7 accordingly

8 In line 473, after "records" insert ", provided any such agreement,
9 lease or other contract may contain a provision that provides a
10 reasonable protocol for the optometrist to gain access to the premises
11 during nonbusiness hours for medical emergencies"

12 In line 681, strike "19a-127k,"

13 After the last section, add the following and renumber sections and
14 internal references accordingly:

15 "Sec. 501. Subsections (b) and (c) of section 20-162bb of the general
16 statutes are repealed and the following is substituted in lieu thereof
17 (*Effective from passage*):

18 (b) [Each] Except as provided in subsection (c) of this section, each
19 person seeking licensure to practice perfusion in this state shall make
20 application on forms prescribed by the department, pay an application
21 fee of two hundred fifty dollars and present to the department
22 satisfactory evidence that such person (1) successfully completed a
23 perfusion education program with standards established by the
24 Accreditation Committee for Perfusion Education and approved by the
25 Commission on Accreditation of Allied Health Education Programs;
26 (2) completed a minimum of fifty cases after graduating from a
27 perfusion education program accredited or approved pursuant to
28 subdivision (1) of this subsection; and (3) after completing the
29 requirements set forth in subdivision (2) of this subsection,
30 successfully completed the certification examination offered by the
31 American Board of Cardiovascular Perfusion, or its successor. The
32 commissioner shall grant a license as a perfusionist to any applicant
33 who meets the requirements of this subsection.

34 (c) [From the period beginning October 1, 2005, and ending
35 December 31, 2006, an applicant for licensure as a perfusionist may, in
36 lieu of the requirements set forth in subsection (b) of this section,
37 submit to the department satisfactory evidence that the applicant has
38 (1) actively engaged in the practice of perfusion in this state since
39 October 1, 2005, or earlier, and (2) been operating a cardiopulmonary
40 bypass system during cardiac surgical procedures in a licensed health
41 care facility as part of the applicant's primary job duties since October
42 1, 2005.] In lieu of the requirements set forth in subsection (b) of this
43 section, a person may qualify for a license to practice perfusion in this
44 state, provided such person: (1) Is currently certified by the American
45 Board of Cardiovascular Perfusion; (2) has worked as a perfusionist in

46 a licensed healthcare facility in another state for a period of not less
47 than five years; and (3) has had no lapse in active practice as
48 perfusionist greater than twenty-four months at the time of filing a
49 licensure application in Connecticut. The commissioner [shall] may
50 grant a license as a perfusionist to any applicant who meets the
51 requirements of this subsection.

52 Sec. 502. (*Effective from passage*) Notwithstanding the provisions of
53 subsection (a) of section 20-74bb of the 2008 supplement to the general
54 statutes, during the period commencing on the effective date of this
55 section and ending thirty days after said effective date, the Department
56 of Public Health may issue a license to practice as a radiographer
57 under chapter 376c of the general statutes to an applicant who presents
58 to the department satisfactory evidence that the applicant: (1) Holds a
59 current radiologic technician license issued by another state, which
60 license was initially issued on or before October 1, 1965, and has no
61 disciplinary history; (2) completed a course of study in radiologic
62 technology on or before June 30, 1964; and (3) has practiced as a
63 radiologic technologist including the taking of x-rays for at least
64 twenty-four months within the five-year period immediately
65 preceding the date that the applicant filed an application with the
66 department.

67 Sec. 503. Subsection (c) of section 20-7c of the general statutes is
68 repealed and the following is substituted in lieu thereof (*Effective*
69 *October 1, 2008*):

70 (c) Upon a written request of a patient, a patient's attorney or
71 authorized representative, or pursuant to a written authorization, a
72 provider, except as provided in section 4-194, shall furnish to the
73 person making such request a copy of the patient's health record,
74 including but not limited to, bills, x-rays and copies of laboratory
75 reports, contact lens specifications based on examinations and final
76 contact lens fittings given within the preceding three months or such
77 longer period of time as determined by the provider but no longer
78 than six months, records of prescriptions and other technical

79 information used in assessing the patient's health condition. No
80 provider shall charge more than [forty-five] sixty-five cents per page,
81 including any research fees, handling fees or related costs, and the cost
82 of first class postage, if applicable, for furnishing a health record
83 pursuant to this subsection, except such provider may charge a patient
84 the amount necessary to cover the cost of materials for furnishing a
85 copy of an x-ray, provided no such charge shall be made for furnishing
86 a health record or part thereof to a patient, a patient's attorney or
87 authorized representative if the record or part thereof is necessary for
88 the purpose of supporting a claim or appeal under any provision of the
89 Social Security Act and the request is accompanied by documentation
90 of the claim or appeal. A provider shall furnish a health record
91 requested pursuant to this section within thirty days of the request.

92 Sec. 504. (*Effective from passage*) Notwithstanding the provisions of
93 subsection (a) of section 20-206bb of the 2008 supplement to the
94 general statutes, during the period commencing on the effective date
95 of this section and ending thirty days after said effective date, the
96 Department of Public Health may issue a license as an acupuncturist
97 under chapter 384c of the general statutes to any applicant who
98 presents satisfactory evidence to the department that the applicant: (1)
99 Received a Bachelor of Medicine degree prior to 1985; (2) successfully
100 completed all portions of the acupuncturist examination administered
101 by the National Commission for the Certification of Acupuncturists;
102 and (3) successfully completed the Clean Needle Technique Course
103 offered by the Council of Colleges of Acupuncture and Oriental
104 Medicine.

105 Sec. 505. Subparagraph (H) of subdivision (7) of subsection (c) of
106 section 7-148 of the 2008 supplement to the general statutes is repealed
107 and the following is substituted in lieu thereof (*Effective October 1,*
108 *2008*):

109 (H) (i) Secure the safety of persons in or passing through the
110 municipality by regulation of shows, processions, parades and music;

- 111 (ii) Regulate and prohibit the carrying on within the municipality of
112 any trade, manufacture, business or profession which is, or may be, so
113 carried on as to become prejudicial to public health, conducive to fraud
114 and cheating, or dangerous to, or constituting an unreasonable
115 annoyance to, those living or owning property in the vicinity;
- 116 (iii) Regulate auctions and garage and tag sales;
- 117 (iv) Prohibit, restrain, license and regulate the business of peddlers,
118 auctioneers and junk dealers in a manner not inconsistent with the
119 general statutes;
- 120 (v) Regulate and prohibit swimming or bathing in the public or
121 exposed places within the municipality;
- 122 (vi) Regulate and license the operation of amusement parks and
123 amusement arcades including, but not limited to, the regulation of
124 mechanical rides and the establishment of the hours of operation;
- 125 (vii) Prohibit, restrain, license and regulate all sports, exhibitions,
126 public amusements and performances and all places where games may
127 be played;
- 128 (viii) Preserve the public peace and good order, prevent and quell
129 riots and disorderly assemblages and prevent disturbing noises;
- 130 (ix) Establish a system to obtain a more accurate registration of
131 births, marriages and deaths than the system provided by the general
132 statutes in a manner not inconsistent with the general statutes;
- 133 (x) Control insect pests or plant diseases in any manner deemed
134 appropriate;
- 135 (xi) Provide for the health of the inhabitants of the municipality and
136 do all things necessary or desirable to secure and promote the public
137 health;
- 138 (xii) Regulate the use of streets, sidewalks, highways, public places

139 and grounds for public and private purposes;

140 (xiii) Make and enforce police, sanitary or other similar regulations
141 and protect or promote the peace, safety, good government and
142 welfare of the municipality and its inhabitants;

143 (xiv) Regulate, in addition to the requirements under section 7-282b,
144 the installation, maintenance and operation of any device or
145 equipment in a residence or place of business which is capable of
146 automatically calling and relaying recorded emergency messages to
147 any state police or municipal police or fire department telephone
148 number or which is capable of automatically calling and relaying
149 recorded emergency messages or other forms of emergency signals to
150 an intermediate third party which shall thereafter call and relay such
151 emergency messages to a state police or municipal police or fire
152 department telephone number. Such regulations may provide for
153 penalties for the transmittal of false alarms by such devices or
154 equipment;

155 (xv) Make and enforce regulations preventing housing blight,
156 including regulations reducing assessments, provided such regulations
157 define housing blight, and including regulations establishing a duty to
158 maintain property and specifying standards to determine if there is
159 neglect; prescribe fines for the violation of such regulations of not less
160 than ten or more than one hundred dollars for each day that a
161 violation continues and, if such fines are prescribed, such municipality
162 shall adopt a citation hearing procedure in accordance with section 7-
163 152c;

164 (xvi) Regulate, on any property owned by the municipality, any
165 activity deemed to be deleterious to public health, including the
166 lighting or carrying of a lighted cigarette, cigar, pipe or similar device.

167 Sec. 506. Section 10-292p of the 2008 supplement to the general
168 statutes is repealed and the following is substituted in lieu thereof
169 (*Effective from passage*):

170 Any school-based health clinic [constructed on or after October 1,
171 2007,] that is located in or attached to a school building constructed on
172 or after July 1, 2009, that shares a first floor exterior wall with the
173 school building shall [be constructed with] include an entrance that is
174 separate from the entrance to the school building.

175 Sec. 507. Section 19a-269b of the 2008 supplement to the general
176 statutes is repealed and the following is substituted in lieu thereof
177 (*Effective October 1, 2008*):

178 (a) As used in this section, "clinical laboratory" has the same
179 meaning as provided in section 19a-30. [, "patient" does not include
180 any person under eighteen years of age and "routine general medical
181 examination" does not include an annual gynecological examination.]

182 (b) Beginning September 1, 2006:

183 [(1) Each physician licensed under chapter 370 shall order a serum
184 creatinine test as part of each patient's routine general medical
185 examination if the patient has not submitted to such test within the
186 one-year period preceding the routine general medical examination.
187 The order shall include a notification that the test is being ordered
188 pursuant to the provisions of this subdivision.

189 (2) For each serum creatinine test performed on a patient admitted
190 as an inpatient to a hospital licensed in this state, the ordering provider
191 shall request, at least once during such patient's hospital stay, that the
192 laboratory performing the test include an estimated glomerular
193 filtration rate in the laboratory report if the patient has not submitted
194 to such test within the one-year period preceding such hospitalization.]

195 [(3)] (1) Any person, firm or corporation operating a clinical
196 laboratory licensed in this state shall ensure that when the clinical
197 laboratory tests a specimen to determine a patient's serum creatinine
198 level, as ordered or prescribed by a physician or provider in a hospital,
199 [pursuant to subdivision (1) or (2) of this subsection,] the clinical
200 laboratory shall (A) calculate the patient's estimated glomerular

201 filtration rate using the patient's age and gender, which information
202 shall be provided to the clinical laboratory by the physician or the
203 provider in a hospital, and (B) include the patient's estimated
204 glomerular filtration rate with its report to the physician or the
205 provider in a hospital.

206 [(4)] (2) A person, firm or corporation operating a clinical laboratory
207 licensed in this state shall be deemed in compliance with subdivision
208 [(3)] (1) of this subsection if the clinical laboratory makes available to
209 the ordering physician or provider in a hospital test order codes for
210 serum creatinine that include eGFR.

211 Sec. 508. Subdivision (3) of subsection (a) of section 20-74ee of the
212 general statutes is repealed and the following is substituted in lieu
213 thereof (*Effective from passage*):

214 (3) Nothing in subsection (c) of section 19a-14, sections 20-74aa to
215 20-74cc, inclusive, and this section shall be construed to require
216 licensure as a radiographer or to limit the activities of: (A) a dental
217 assistant as defined in section 20-112a, provided such dental assistant
218 is engaged in the taking of dental x-rays under the supervision and
219 control of a dentist licensed pursuant to chapter 379 and can
220 demonstrate successful completion of the dental radiography portion
221 of an examination prescribed by the Dental Assisting National Board,
222 or (B) a dental assistant student, intern or trainee pursuing practical
223 training in the taking of dental x-rays provided such activities
224 constitute part of a supervised course or training program and such
225 person is designated by a title which clearly indicates such person's
226 status as a student, intern or trainee.

227 Sec. 509. Section 19a-562a of the 2008 supplement to the general
228 statutes is repealed and the following is substituted in lieu thereof
229 (*Effective October 1, 2008*):

230 (a) Each Alzheimer's special care unit or program shall annually
231 provide Alzheimer's and dementia specific training to all licensed and
232 registered direct care staff and nurse's aides who provide direct patient

233 care to residents enrolled in the Alzheimer's special care unit or
234 program. Such requirements shall include, but not be limited to, (1) not
235 less than eight hours of dementia-specific training, which shall be
236 completed not later than six months after the date of employment and
237 not less than [three] eight hours of such training annually thereafter,
238 and (2) annual training of not less than two hours in pain recognition
239 and administration of pain management techniques for direct care
240 staff.

241 (b) Each Alzheimer's special care unit or program shall annually
242 provide a minimum of one hour of Alzheimer's and dementia specific
243 training to all unlicensed and unregistered staff, except nurse's aides,
244 who provide services and care to residents enrolled in the Alzheimer's
245 special care unit or program. For such staff hired on or after October 1,
246 2007, such training shall be completed not later than six months after
247 the date of employment.

248 Sec. 510. Section 19a-127k of the general statutes is repealed and the
249 following is substituted in lieu thereof (*Effective October 1, 2008*):

250 (a) As used in this section:

251 (1) "Community benefits program" means any voluntary program to
252 promote preventive care and to improve the health status for working
253 families and populations at risk in the communities within the
254 geographic service areas of a managed care organization or a hospital
255 in accordance with guidelines established pursuant to subsection (c) of
256 this section;

257 (2) "Managed care organization" has the same meaning as provided
258 in section 38a-478;

259 (3) "Hospital" has the same meaning as provided in section 19a-490
260 of the 2008 supplement to the general statutes. [; and

261 (4) "Commissioner" means the Commissioner of Public Health.]

262 (b) On or before January 1, 2005, and biennially thereafter, each

263 managed care organization and each hospital shall submit to the
264 [commissioner, or the commissioner's designee] the Healthcare
265 Advocate, or the Healthcare Advocate's designee, a report on whether
266 the managed care organization or hospital has in place a community
267 benefits program. If a managed care organization or hospital elects to
268 develop a community benefits program, the report required by this
269 subsection shall comply with the reporting requirements of subsection
270 (d) of this section.

271 (c) A managed care organization or hospital may develop
272 community benefit guidelines intended to promote preventive care
273 and to improve the health status for working families and populations
274 at risk, whether or not those individuals are enrollees of the managed
275 care plan or patients of the hospital. The guidelines shall focus on the
276 following principles:

277 (1) Adoption and publication of a community benefits policy
278 statement setting forth the organization's or hospital's commitment to
279 a formal community benefits program;

280 (2) The responsibility for overseeing the development and
281 implementation of the community benefits program, the resources to
282 be allocated and the administrative mechanisms for the regular
283 evaluation of the program;

284 (3) Seeking assistance and meaningful participation from the
285 communities within the organization's or hospital's geographic service
286 areas in developing and implementing the program and in defining
287 the targeted populations and the specific health care needs it should
288 address. In doing so, the governing body or management of the
289 organization or hospital shall give priority to the public health needs
290 outlined in the most recent version of the state health plan prepared by
291 the Department of Public Health pursuant to section 19a-7; and

292 (4) Developing its program based upon an assessment of the health
293 care needs and resources of the targeted populations, particularly low
294 and middle-income, medically underserved populations and barriers

295 to accessing health care, including, but not limited to, cultural,
296 linguistic and physical barriers to accessible health care, lack of
297 information on available sources of health care coverage and services,
298 and the benefits of preventive health care. The program shall consider
299 the health care needs of a broad spectrum of age groups and health
300 conditions.

301 (d) Each managed care organization and each hospital that chooses
302 to participate in developing a community benefits program shall
303 include in the biennial report required by subsection (b) of this section
304 the status of the program, if any, that the organization or hospital
305 established. If the managed care organization or hospital has chosen to
306 participate in a community benefits program, the report shall include
307 the following components: (1) The community benefits policy
308 statement of the managed care organization or hospital; (2) the
309 mechanism by which community participation is solicited and
310 incorporated in the community benefits program; (3) identification of
311 community health needs that were considered in developing and
312 implementing the community benefits program; (4) a narrative
313 description of the community benefits, community services, and
314 preventive health education provided or proposed, which may include
315 measurements related to the number of people served and health
316 status outcomes; (5) measures taken to evaluate the results of the
317 community benefits program and proposed revisions to the program;
318 (6) to the extent feasible, a community benefits budget and a good faith
319 effort to measure expenditures and administrative costs associated
320 with the community benefits program, including both cash and in-
321 kind commitments; and (7) a summary of the extent to which the
322 managed care organization or hospital has developed and met the
323 guidelines listed in subsection (c) of this section. Each managed care
324 organization and each hospital shall make a copy of the report
325 available, upon request, to any member of the public.

326 (e) The [commissioner, or the commissioner's designee] Healthcare
327 Advocate, or the Healthcare Advocate's designee, shall, within
328 available appropriations, develop a summary and analysis of the

329 community benefits program reports submitted by managed care
330 organizations and hospitals under this section and shall review such
331 reports for adherence to the guidelines set forth in subsection (c) of this
332 section. Not later than October 1, 2005, and biennially thereafter, the
333 [commissioner, or the commissioner's designee] Healthcare Advocate,
334 or the Healthcare Advocate's designee, shall make such summary and
335 analysis available to the public upon request.

336 (f) The [commissioner] Healthcare Advocate may, after notice and
337 opportunity for a hearing, in accordance with chapter 54, impose a
338 civil penalty on any managed care organization or hospital that fails to
339 submit the report required pursuant to this section by the date
340 specified in subsection (b) of this section. Such penalty shall be not
341 more than fifty dollars a day for each day after the required submittal
342 date that such report is not submitted.

343 Sec. 511. Subsection (h) of section 19a-180 of the 2008 supplement to
344 the general statutes is repealed and the following is substituted in lieu
345 thereof (*Effective October 1, 2008*):

346 (h) Notwithstanding the provisions of subsection (a) of this section,
347 any volunteer, hospital-based or municipal ambulance service that is
348 licensed or certified and is a primary service area responder may apply
349 to the commissioner to add one emergency vehicle to its existing fleet
350 every three years, on a short form application prescribed by the
351 commissioner. No such volunteer, hospital-based or municipal
352 ambulance service may add more than one emergency vehicle to its
353 existing fleet pursuant to this subsection regardless of the number of
354 municipalities served by such volunteer, hospital-based or municipal
355 ambulance service. Upon making such application, the applicant shall
356 notify in writing all other primary service area responders in any
357 municipality or abutting municipality in which the applicant proposes
358 to add the additional emergency vehicle. Except in the case where a
359 primary service area responder entitled to receive notification of such
360 application objects, in writing, to the commissioner not later than
361 fifteen calendar days after receiving such notice, the application shall

362 be deemed approved thirty calendar days after filing. If any such
363 primary service area responder files an objection with the
364 commissioner within the fifteen-calendar-day time period and requests
365 a hearing, the applicant shall be required to demonstrate need at a
366 public hearing as required under subsection (a) of this section.

367 Sec. 512. Section 20-188 of the general statutes is repealed and the
368 following is substituted in lieu thereof (*Effective October 1, 2008*):

369 Before granting a license to a psychologist, the department shall,
370 except as provided in section 20-190, require any applicant therefor to
371 pass an examination in psychology [to be given at such time and place
372 as the department prescribes. Examinations shall be] prescribed by the
373 department [,] with the advice and consent of the board. [, and shall be
374 administered to applicants by the Department of Public Health under
375 the supervision of the board.] Each applicant shall pay a fee of four
376 hundred fifty dollars, and shall satisfy the department that [he] such
377 applicant (1) has received the doctoral degree based on a program of
378 studies whose content was primarily psychological from an
379 educational institution [registered as provided in] approved in
380 accordance with section 20-189; and (2) has had at least one year's
381 [postdoctoral] experience [of a type satisfactory to the board. Such
382 applicant shall further verify that he intends in good faith to practice
383 psychology in this state] that meets the requirements established in
384 regulations adopted by the department, in consultation with the board,
385 in accordance with the provisions of chapter 54. The department shall
386 establish a passing score with the consent of the board. [The
387 Department of Public Health shall grade the examinations returned by
388 the candidates. Any unsuccessful candidate may, upon written request
389 to the department, see his graded paper.] Any certificate granted by
390 the board of examiners prior to June 24, 1969, shall be deemed a valid
391 license permitting continuance of profession subject to the provisions
392 of this chapter.

393 Sec. 513. Subsection (a) of section 20-195 of the general statutes is
394 repealed and the following is substituted in lieu thereof (*Effective*

395 October 1, 2008):

396 (a) Nothing in this chapter shall be construed to limit the activities
397 and services of a graduate student, intern or resident in psychology,
398 pursuing a course of study in an educational institution [registered]
399 under the provisions of section 20-189, if such activities constitute a
400 part of a supervised course of study. No license as a psychologist shall
401 be required of a person holding a doctoral degree based on a program
402 of studies whose content was primarily psychological from an
403 educational institution approved under the provisions of section 20-
404 189, provided such activities and services are necessary to satisfy the
405 [postdoctoral] work experience as required by section 20-188, as
406 amended by this act. The provisions of this chapter shall not apply to
407 any person in the salaried employ of any person, firm, corporation,
408 educational institution or governmental agency when acting within the
409 person's own organization. Nothing in this chapter shall be construed
410 to prevent the giving of accurate information concerning education
411 and experience by any person in any application for employment.
412 Nothing in this chapter shall be construed to prevent physicians,
413 optometrists, chiropractors, members of the clergy, attorneys-at-law or
414 social workers from doing work of a psychological nature consistent
415 with accepted standards in their respective professions.

416 Sec. 514. Section 38a-479aa of the 2008 supplement to the general
417 statutes is amended by adding subsection (n) as follows (*Effective from*
418 *passage*):

419 (NEW) (n) The requirements of subsections (h) and (i) of this section
420 shall not apply to a consortium of federally qualified health centers
421 funded by the state, providing services only to recipients of programs
422 administered by the Department of Social Services. The Commissioner
423 of Social Services shall adopt regulations, in accordance with chapter
424 54, to establish criteria to certify any such federally qualified health
425 center, including, but not limited to, minimum reserve fund
426 requirements.

427 Sec. 515. Section 10a-155 of the general statutes is repealed and the
428 following is substituted in lieu thereof (*Effective October 1, 2008*):

429 (a) Each institution of higher education shall require each full-time
430 or matriculating student born after December 31, 1956, to provide
431 proof of adequate immunization against measles, [and] rubella and on
432 and after August 1, 2010, to provide proof of adequate immunization
433 against mumps and varicella as recommended by the national
434 Advisory Committee for Immunization Practices before permitting
435 such student to enroll in such institution. Any such student who (1)
436 presents a certificate from a physician stating that in the opinion of
437 such physician such immunization is medically contraindicated, (2)
438 provides a statement that such immunization would be contrary to his
439 religious beliefs, (3) presents a certificate from a physician, or from the
440 director of health in the student's present or previous town of
441 residence, stating that the student has had a confirmed case of such
442 disease, (4) is enrolled exclusively in a program for which students do
443 not congregate on campus for classes or to participate in institutional-
444 sponsored events, such as students enrolled in distance learning
445 programs for individualized home study or programs conducted
446 entirely through electronic media in a setting without other students
447 present, or (5) graduated from a public or nonpublic high school in this
448 state in 1999 or later and was not exempt from the measles, [and]
449 rubella and on and after August 1, 2010, the mumps vaccination
450 requirement pursuant to subdivision (2) or (3) of subsection (a) of
451 section 10-204a shall be exempt from the appropriate provisions of this
452 section.

453 (b) Each institution of higher education shall keep uniform records
454 of the immunizations and immunization status of each student, based
455 on the certificate of immunization or other evidence acceptable
456 pursuant to subsection (a) of this section. The record shall be part of
457 the student's permanent record. By November first of each year, the
458 chief administrative officer of each institution of higher education shall
459 cause to be submitted to the Commissioner of Public Health, on a form
460 provided by the commissioner, a summary report of the immunization

461 status of all students enrolling in such institution.

462 Sec. 516. Section 19a-437 of the general statutes is repealed and the
463 following is substituted in lieu thereof (*Effective October 1, 2008*):

464 Before [he may be issued] the issuance of a license in accordance
465 with the provisions of this chapter, the applicant shall first:

466 (1) Determine the maximum number of people which will be
467 assembled or admitted to the location of the assembly, provided the
468 maximum number shall not exceed the maximum number which can
469 reasonably assemble at the location of the assembly in consideration of
470 the nature of the assembly and provided, where the assembly is to
471 continue overnight, the maximum number shall not be more than is
472 allowed to sleep within the boundaries of the location of the assembly
473 by the zoning or health ordinances of the municipality;

474 (2) Provide proof that food concessions will be in operation on the
475 grounds with sufficient capacity to accommodate the number of
476 persons expected to be in attendance and that he will furnish at his
477 own expense before the assembly commences: (A) Potable water,
478 meeting all federal and state requirements for purity, sufficient to
479 provide drinking water for the maximum number of people to be
480 assembled at the rate of at least one gallon per person per day and
481 water for bathing at the rate of at least ten gallons per person per day;
482 (B) separate enclosed toilets for males and females, meeting all state
483 and local specifications, conveniently located throughout the grounds,
484 sufficient to provide facilities for the maximum number of people to be
485 assembled at the rate of at least one toilet for every two hundred
486 females and at least one toilet for every three hundred males, together
487 with an efficient, sanitary means of disposing of waste matter
488 deposited, which is in compliance with all state and local laws and
489 regulations. A lavatory with running water under pressure and a
490 continuous supply of soap and paper towels shall be provided with
491 each toilet; (C) a sanitary method of disposing of solid waste, in
492 compliance with state and local laws and regulations, sufficient to

493 dispose of the solid waste production of the maximum number of
494 people to be assembled at the rate of at least two and one-half pounds
495 of solid waste per person per day, together with a plan for holding and
496 a plan for collecting all such waste at least once each day of the
497 assembly and sufficient trash cans with tight fitting lids and personnel
498 to perform the task; (D) [physicians and nurses licensed to practice in
499 this state at the rate of at least one physician for every one thousand
500 people and at least one nurse for every fifteen hundred people
501 anticipated to be assembled, together with an enclosed covered
502 structure where treatment may be rendered, containing a separately
503 enclosed treatment room for each physician, and at least one
504 emergency ambulance available for use at all times] a written plan
505 reviewed by the primary service area responder, as defined in section
506 19a-175, in the location where the assembly is to be held, that indicates
507 that the applicant has satisfactorily planned and arranged for the on-
508 site availability of an emergency medical service organization, as
509 defined in section 19a-175, during the duration of the assembly; (E) if
510 the assembly is to continue during hours of darkness, illumination
511 sufficient to light the entire area of the assembly at the rate of at least
512 five foot candles, but not to shine unreasonably beyond the boundaries
513 of the location of the assembly; (F) a free parking area inside of the
514 assembly grounds sufficient to provide parking space for the
515 maximum number of people to be assembled at the rate of at least one
516 parking space for every four persons; (G) telephones connected to
517 outside lines sufficient to provide service for the maximum number of
518 people to be assembled at the rate of at least one separate line and
519 receiver for each one thousand persons; (H) if the assembly is to
520 continue overnight, camping facilities in compliance with all state and
521 local requirements, sufficient to provide camping accommodations for
522 the maximum number of people to be assembled; (I) security guards,
523 either regularly employed, duly sworn, off duty policemen or
524 constables or private guards, licensed in this state, sufficient to provide
525 adequate security for the maximum number of people to be assembled
526 at the rate of at least one security guard for every seven hundred fifty
527 people; (J) fire protection, including alarms, extinguishing devices and

528 fire lanes and escapes, sufficient to meet all state and local standards
529 for the location of the assembly and sufficient emergency personnel to
530 operate efficiently the required equipment; (K) all reasonably
531 necessary precautions to insure that the sound of the assembly will not
532 carry unreasonably beyond the enclosed boundaries of the location of
533 the assembly; and (L) a bond, filed with the clerk of the municipality in
534 which the assembly is to gather, either in cash or underwritten by a
535 surety company licensed to do business in this state at the rate of four
536 dollars per person for the maximum number of people permitted to
537 assemble, which (i) shall indemnify and hold harmless the
538 municipality or any of its agents, officers, servants or employees from
539 any liability or causes of action which might arise by reason of
540 granting the license, and from any cost incurred in cleaning up any
541 waste material produced or left by the assembly; (ii) guarantee the
542 state the payment of any taxes which may accrue as a result of the
543 gathering; and (iii) guarantee reimbursement of ticketholders if the
544 event is cancelled.

545 Sec. 517. Section 7-48 of the general statutes, as amended by
546 substitute house bill 5808 of the current session, is repealed and the
547 following is substituted in lieu thereof (*Effective October 1, 2008*):

548 (a) Not later than ten days after each live birth which occurs in this
549 state, a birth certificate shall be filed with the registrar of vital statistics
550 in the town in which the birth occurred and the certificate shall be
551 registered if properly filed, by manual or electronic systems as
552 prescribed by the commissioner. On and after January 1, 1994, each
553 hospital with two hundred or more live births in calendar year 1990, or
554 any subsequent calendar year, shall electronically transmit birth
555 information data to the department in a computer format approved by
556 the department. Each birth certificate shall contain such information as
557 the department may require and shall be completed in its entirety.
558 [The Social Security number of the mother and father] Medical and
559 health information which is required by the department, including
560 information regarding voluntary acknowledgments of paternity and
561 whether the child was born out of wedlock, shall be recorded on a

562 confidential portion of the certificate to be sent directly to the
563 department. Such confidential records may be used for statistical and
564 health purposes by the department or by a local director of health, as
565 authorized by the department, for records related to the town served
566 by the local director of health and where the mother was a resident at
567 the time of the birth of the child. Such birth certificate and confidential
568 records may be used internally by the hospital for records transmitted
569 by the hospital for statistical, health and quality assurance purposes.
570 The department shall give due consideration to national uniformity in
571 vital statistics in prescribing the format and content of such certificate.

572 (b) When a birth occurs in an institution or en route thereto, the
573 person in charge of the institution or such person's designated
574 representative shall obtain all available data required by the certificate,
575 prepare the certificate, certify that the child was born alive at the place
576 and time and on the date stated either by signature or by an electronic
577 process approved by the commissioner and file the certificate with the
578 registrar of vital statistics in the town in which the birth occurred, not
579 later than ten days after such birth. The physician or other person in
580 attendance, and the physician, institution or other person providing
581 prenatal care, shall provide the medical information required by the
582 certificate not later than seventy-two hours after the birth.

583 (c) When a birth occurs outside an institution, the certificate shall be
584 prepared and filed by the physician or midwife in attendance at or
585 immediately after the birth or, in the absence of such a person, by the
586 father or mother.

587 (d) When a birth occurs in a moving conveyance and the child is
588 first removed from the conveyance in this state, the birth shall be
589 registered in this state and the place where the child is first removed
590 shall be considered the place of birth.

591 Sec. 518. Section 7-51 of the general statutes, as amended by
592 substitute house bill 5808 of the current session, is repealed and the
593 following is substituted in lieu thereof (*Effective October 1, 2008*):

594 (a) The department and registrars of vital records shall restrict
595 access to and issuance of a certified copy of birth and fetal death
596 records and certificates less than one hundred years old, to the
597 following eligible parties: (1) The person whose birth is recorded, if
598 over eighteen years of age; (2) such person's children, grandchildren,
599 spouse, parent, guardian or grandparent; (3) the chief executive officer
600 of the municipality where the birth or fetal death occurred, or the chief
601 executive officer's authorized agent; (4) the local director of health for
602 the town or city where the birth or fetal death occurred or where the
603 mother was a resident at the time of the birth or fetal death, or the
604 director's authorized agent; (5) attorneys-at-law and title examiners
605 representing such person or such person's parent, guardian, child or
606 surviving spouse; (6) members of genealogical societies incorporated
607 or authorized by the Secretary of the State to do business or conduct
608 affairs in this state; (7) agents of a state or federal agency as approved
609 by the department; and (8) researchers approved by the department
610 pursuant to section 19a-25. Except as provided in section 19a-42a,
611 access to confidential files on paternity, adoption, gender change or
612 gestational agreements, or information contained within such files,
613 shall not be released to any party, including the eligible parties listed
614 in this subsection, except upon an order of a court of competent
615 jurisdiction.

616 (b) No person other than the eligible parties listed in subsection (a)
617 of this section shall be entitled to examine or receive a copy of any
618 birth or fetal death record or certificate, ~~[record or]~~ access the
619 information contained therein, or disclose any matter contained
620 therein, except upon written order of a court of competent jurisdiction.
621 Nothing in this section shall be construed to permit disclosure to any
622 person, including the eligible parties listed in subsection (a) of this
623 section, of [(1) Social Security numbers, (2)] information contained in
624 the "information for [medical and] health and statistical use only"
625 section [of a birth certificate,] or [(3)] the ["information for statistical"]
626 "administrative purposes only" section of a birth certificate, [other than
627 the race and ethnicity information of the parent or parents recorded in

628 the "administrative purposes" section of an electronically filed birth or
629 fetal death certificate or displayed on a manually filed birth or fetal
630 death certificate,] unless specifically authorized by [state or federal law
631 or by] the department for statistical or research purposes. The Social
632 Security number of the parent or parents listed on any birth certificate
633 shall not be released to any party, except to those persons or entities
634 authorized by state or federal law. Such confidential information, other
635 than the excluded information set forth in this subsection, shall not be
636 subject to subpoena or court order and shall not be admissible before
637 any court or other tribunal.

638 (c) The registrar of the town in which the birth or fetal death
639 occurred or of the town in which the mother resided at the time of the
640 birth or fetal death, or the department, may issue a certified copy of the
641 certificate of birth or fetal death of any person born in this state which
642 is kept in paper form in the custody of the registrar. Such certificate
643 shall be issued upon the written request of an eligible party listed in
644 subsection (a) of this section. Any registrar of vital statistics in this
645 state with access, as authorized by the department, to the electronic
646 vital records system of the department may issue a certified copy of
647 the electronically filed certificate of birth or fetal death of any person
648 born in this state upon the written request of an eligible party listed in
649 subsection (a) of this section.

650 (d) The department and each registrar of vital statistics shall issue
651 only certified copies of birth certificates or fetal death certificates for
652 births or fetal deaths occurring less than one hundred years prior to
653 the date of the request.

654 Sec. 519. Subsection (a) of section 7-50, as amended by substitute
655 house bill 5808 of the current session, of the general statutes is repealed
656 and the following is substituted in lieu thereof (*Effective October 1,*
657 *2008*):

658 (a) No certificate of birth shall contain any specific statement that
659 the child was born in or out of wedlock or reference to illegitimacy of

660 the child or to the marital status of the mother, except that information
661 on whether the child was born in or out of wedlock and the marital
662 status of the mother shall be recorded on a confidential portion of the
663 certificate pursuant to section 7-48, as amended by this act. Upon the
664 completion of an acknowledgment of paternity at a hospital,
665 concurrent with the hospital's electronic transmission of birth data to
666 the department, or at a town in the case of a home birth, concurrent
667 with the registration of the birth data by the town, the
668 acknowledgment shall be filed in the paternity registry maintained by
669 the department, as required by section 19a-42a, and the name of the
670 father of a child born out of wedlock shall be entered in or upon the
671 birth certificate or birth record of such child. All properly completed
672 post birth acknowledgments or certified adjudications of paternity
673 received by the department shall be filed in the paternity registry
674 maintained by the department, and the name of the father of the child
675 born out of wedlock shall be entered in or upon the birth record or
676 certificate of such child by the department, if there is no paternity
677 already recorded on the birth certificate. If another father's information
678 is recorded on the certificate, the original father's information shall not
679 be removed except upon receipt by the department of a certified order
680 by a court of competent jurisdiction in which there is a finding that the
681 individual recorded on the birth certificate, specifically referenced by
682 name, is not the child's father, or a finding that a different individual
683 than the one recorded, specifically referenced by name, is the child's
684 father. The name of the father on a birth certificate or birth record shall
685 otherwise be removed or changed only upon the filing of a rescission
686 in such registry, as provided in section 19a-42a. The Social Security
687 number of the father of a child born out of wedlock may be entered in
688 or upon the birth certificate or birth record of such child if such entry is
689 done in accordance with [section 7-48, and] 5 USC 552a note.

690 Sec. 520. Section 7-51a of the general statutes, as amended by
691 substitute house bill 5808 of the current session, is repealed and the
692 following is substituted in lieu thereof (*Effective October 1, 2008*):

693 (a) Any person eighteen years of age or older may purchase certified

694 copies of marriage and death records, and certified copies of records of
695 births or fetal deaths which are at least one hundred years old, in the
696 custody of any registrar of vital statistics. The department may issue
697 uncertified copies of death certificates for deaths occurring less than
698 one hundred years ago, and uncertified copies of birth, marriage,
699 death and fetal death certificates for births, marriages, deaths and fetal
700 deaths that occurred at least one hundred years ago, to researchers
701 approved by the department pursuant to section 19a-25, and to state
702 and federal agencies approved by the department. During all normal
703 business hours, members of genealogical societies incorporated or
704 authorized by the Secretary of the State to do business or conduct
705 affairs in this state shall (1) have full access to all vital records in the
706 custody of any registrar of vital statistics, including certificates,
707 ledgers, record books, card files, indexes and database printouts,
708 except for those records containing Social Security numbers protected
709 pursuant to 42 USC 405 (c)(2)(C), and confidential files on adoptions,
710 gender change, gestational agreements and paternity, (2) be permitted
711 to make notes from such records, (3) be permitted to purchase certified
712 copies of such records, and (4) be permitted to incorporate statistics
713 derived from such records in the publications of such genealogical
714 societies. For all vital records containing Social Security numbers that
715 are protected from disclosure pursuant to federal law, the Social
716 Security numbers contained on such records shall be redacted from
717 any certified copy of such records issued to a genealogist by a registrar
718 of vital statistics.

719 (b) For marriage and civil union licenses, the Social Security
720 numbers of the parties to the marriage or civil union shall be recorded
721 in the "administrative purposes" section of the marriage or civil union
722 license and the application for such license. All persons specified on
723 the license, including the parties to the marriage or civil union,
724 officiator and local registrar shall have access to the Social Security
725 numbers specified on the marriage or civil union license and the
726 application for such license for the purpose of processing the license.
727 Only the parties to a marriage or civil union, or entities authorized by

728 state or federal law, may receive a certified copy of a marriage or civil
729 union license with the Social Security numbers included on the license.
730 Any other individual, researcher or state or federal agency requesting
731 a certified or uncertified copy of any marriage or civil union license in
732 accordance with the provisions of this section shall be provided such
733 copy with such Social Security numbers removed or redacted, or with
734 the "administrative purposes" section omitted.

735 (c) For deaths occurring after December 31, 2001, the Social Security
736 number, occupation, business or industry, race, Hispanic origin if
737 applicable, and educational level of the deceased person, if known,
738 shall be recorded in the "administrative purposes" section of the death
739 certificate. All parties specified on the certificate, including the
740 informant, licensed funeral director, licensed embalmer, conservator,
741 surviving spouse, physician and town clerk, shall have access to the
742 Social Security numbers of the decedent as well as other information
743 contained in the "administrative purposes" section specified on the
744 original death certificate for the purpose of processing the certificate.
745 For any death occurring after July 1, 1997, only the surviving spouse,
746 [or] next of kin or state and federal agencies authorized by federal law
747 may receive a certified copy of a death certificate with the decedent's
748 Social Security number or the complete "administrative purposes"
749 section included on the certificate. Any researcher requesting a death
750 certificate for a death occurring after July 1, 1997, may obtain the
751 information included in the "administrative purposes" section of such
752 certificate, except that the decedent's Social Security number shall be
753 redacted.

754 (d) The registrar of vital statistics of any town or city in this state
755 that has access to an electronic vital records system, as authorized by
756 the department, may use such system to issue certified copies of birth,
757 death, fetal death or marriage certificates that are electronically filed in
758 such system.

759 Sec. 521. Subsection (g) of section 19a-88 of the 2008 supplement to
760 the general statutes is repealed and the following is substituted in lieu

761 thereof (*Effective July 1, 2008*):

762 (g) On or before July 1, 2008, the Department of Public Health shall
763 establish and implement a secure on-line license renewal system for
764 persons holding a license to practice medicine or surgery under
765 chapter 370, dentistry under chapter 379 or nursing under chapter 378.
766 The department shall allow any such person who renews his or her
767 license using the on-line license renewal system to pay his or her
768 professional service fees on-line by means of a credit card or electronic
769 transfer of funds from a bank or credit union account and may charge
770 such person a service fee not to exceed five dollars for any such on-line
771 payment made by credit card or electronic funds transfer. On or before
772 January 1, 2009, the department shall submit, in accordance with
773 section 11-4a, a report on the feasibility and implications of the
774 implementation of a biennial license renewal system for persons
775 holding a license to practice nursing under chapter 378 to the joint
776 standing committee of the General Assembly having cognizance of
777 matters relating to public health.

778 Sec. 522. (*Effective from passage*) The Department of Public Health, in
779 consultation with the Departments of Environmental Protection and
780 Consumer Protection, shall convene a working group of individuals to
781 study and make legislative recommendations to ensure that property
782 owners of new construction, with a private water supply well that
783 serves as the source of drinking water are assured of an adequate
784 supply of water that meets current standards for potability as defined
785 in the regulations of Connecticut state agencies. The working group
786 shall also study and make recommendations concerning the
787 installation of replacement water supply wells on properties where
788 there is insufficient area to meet the current separation distances as
789 specified in the regulations of Connecticut state agencies. The working
790 group shall consist of: (1) The Commissioner of Public Health, or the
791 commissioner's designee or designees; (2) the Commissioner of
792 Environmental Protection, or the commissioner's designee or
793 designees; (3) the Commissioner of Consumer Protection, or the
794 commissioner's designee or designees; and (4) various interested

795 stakeholders who have expressed to the Department of Public Health a
796 willingness to work with the department on such issues. Not later than
797 July 1, 2009, the working group shall report, in accordance with section
798 11-4a of the general statutes, its legislative recommendations to the
799 joint standing committees of the General Assembly having cognizance
800 of matters relating public health, environment and consumer
801 protection.

802 Sec. 523. Section 17b-288 of the general statutes is repealed and the
803 following is substituted in lieu thereof (*Effective July 1, 2008*):

804 (a) There is established an organ transplant account which shall be a
805 separate, nonlapsing account within the General Fund. Any moneys
806 collected under the contribution system established under section 12-
807 743 shall be deposited by the Commissioner of Revenue Services into
808 the account. This account may also receive moneys from public and
809 private sources or from the federal government. All moneys deposited
810 in the account shall be used by the Department of Social Services or
811 persons acting under a contract with the department, (1) to assist
812 residents of the state in paying all or part of any costs associated with a
813 medically required organ transplant, [or] (2) to assist individuals who
814 have donated an organ to a resident of the state in paying all or part of
815 any costs associated with the organ donation, including, but not
816 limited to, costs of transportation, accommodation and lost wages, or
817 (3) the promotion of the income tax contribution system and the organ
818 transplant account. Expenditures from the account in any fiscal year
819 for the promotion of the contribution system or the account shall not
820 exceed ten per cent of the amount of moneys raised during the
821 previous fiscal year provided such limitation shall not apply to an
822 expenditure of not more than fifteen thousand dollars from the
823 account on or before July 1, 1994, to reimburse expenditures made on
824 or before said date, with prior written authorization of the
825 Commissioner of Public Health, by private organizations to promote
826 the contribution system and the organ transplant account.

827 (b) The Commissioner of Social Services shall adopt regulations, in

828 accordance with the provisions of chapter 54, to provide for the
829 distribution of funds available pursuant to this section and section 12-
830 743.

831 Sec. 524. Subsection (b) of section 19a-323 of the 2008 supplement to
832 the general statutes is repealed and the following is substituted in lieu
833 thereof (*Effective October 1, 2008*):

834 (b) If death occurred in this state, the death certificate required by
835 law shall be filed with the registrar of vital statistics for the town in
836 which such person died, if known, or, if not known, for the town in
837 which the body was found. The Chief Medical Examiner, Deputy Chief
838 Medical Examiner, associate medical examiner, or an authorized
839 assistant medical examiner shall complete the cremation certificate,
840 stating that such medical examiner has made inquiry into the cause
841 and manner of death and is of the opinion that no further examination
842 or judicial inquiry is necessary. The cremation certificate shall be
843 submitted to the registrar of vital statistics of the town in which such
844 person died, if known, or, if not known, of the town in which the body
845 was found, or with the registrar of vital statistics of the town in which
846 the funeral director having charge of the body is located. Upon receipt
847 of the cremation certificate, the registrar shall authorize the cremation
848 certificate, keep it on permanent record, and issue a cremation permit,
849 except that if the cremation certificate is submitted to the registrar of
850 the town where the funeral director is located, such certificate shall be
851 forwarded to the registrar of the town where the person died to be
852 kept on permanent record. The estate of the deceased person, if any,
853 shall pay the sum of forty dollars for the issuance of the cremation
854 certificate or an amount equivalent to the compensation then being
855 paid by the state to authorized assistant medical examiners, if greater,
856 provided, the Office of the Chief Medical Examiner shall not assess any
857 fees for costs that are associated with the cremation of a stillborn fetus.
858 No cremation certificate shall be required for a permit to cremate the
859 remains of bodies pursuant to section 19a-270a. When the cremation
860 certificate is submitted to a town other than that where the person
861 died, the registrar of vital statistics for such other town shall ascertain

862 from the original removal, transit and burial permit that the certificates
863 required by the state statutes have been received and recorded, that
864 the body has been prepared in accordance with the Public Health Code
865 and that the entry regarding the place of disposal is correct. Whenever
866 the registrar finds that the place of disposal is incorrect, the registrar
867 shall issue a corrected removal, transit and burial permit and, after
868 inscribing and recording the original permit in the manner prescribed
869 for sextons' reports under section 7-72, shall then immediately give
870 written notice to the registrar for the town where the death occurred of
871 the change in place of disposal stating the name and place of the
872 crematory and the date of cremation. Such written notice shall be
873 sufficient authorization to correct these items on the original certificate
874 of death. The fee for a cremation permit shall be three dollars and for
875 the written notice one dollar. The Department of Public Health shall
876 provide forms for cremation permits, which shall not be the same as
877 for regular burial permits and shall include space to record
878 information about the intended manner of disposition of the cremated
879 remains, and such blanks and books as may be required by the
880 registrars.

881 Sec. 525. Section 19a-26 of the 2008 supplement to the general
882 statutes is repealed and the following is substituted in lieu thereof
883 (*Effective July 1, 2008*):

884 The Department of Public Health may establish, maintain and
885 control state laboratories to perform examinations of supposed morbid
886 tissues, other laboratory tests for the diagnosis and control of
887 preventable diseases, and laboratory work in the field of sanitation,
888 environmental and occupational testing and research studies for the
889 protection and preservation of the public health. Such laboratory
890 services shall be performed upon the application of licensed
891 physicians, other laboratories, licensed dentists, licensed podiatrists,
892 local directors of health, public utilities or state departments or
893 institutions, subject to regulations prescribed by the Commissioner of
894 Public Health, and upon payment of any applicable fee as provided in
895 this section. For such purposes the department may provide necessary

896 buildings and apparatus, employ, subject to the provisions of chapter
897 67, administrative and scientific personnel and assistants and do all
898 things necessary for the conduct of such laboratories. The
899 Commissioner of Public Health may establish a schedule of fees,
900 provided the commissioner waives the fees for local directors of health
901 and local law enforcement agencies. If the commissioner establishes a
902 schedule of fees, the commissioner may waive (1) the fees, in full or in
903 part, for others if the commissioner determines that the public health
904 requires a waiver, and (2) fees for chlamydia and gonorrhea testing for
905 nonprofit organizations and institutions of higher education if the
906 organization or institution provides combination chlamydia and
907 gonorrhea test kits. The commissioner shall also establish a fair
908 handling fee which a client of a state laboratory may charge a person
909 or third party payer for arranging for the services of the laboratory.
910 Such client shall not charge an amount in excess of such handling fee.

911 Sec. 526. (NEW) (*Effective July 1, 2008*) On or before September 1,
912 2008, the Department of Public Health, in collaboration with the
913 Department of Education, shall contact each local and regional board
914 of education to make such boards aware of information concerning
915 meningococcal meningitis. Such information shall include, but not
916 necessarily be limited to, information related to the causes, symptoms
917 and spread of meningococcal meningitis and vaccination information
918 that reflects the current recommendations from the United States
919 Center for Disease Control and Protection. On and after September 1,
920 2008, the department shall periodically update the information
921 provided to such boards concerning meningococcal meningitis.

922 Sec. 527. Subdivision (1) of subsection (c) of section 19a-127l of the
923 general statutes is repealed and the following is substituted in lieu
924 thereof (*Effective July 1, 2008*):

925 (c) (1) There is established a Quality of Care Advisory Committee
926 which shall advise the Department of Public Health on the issues set
927 forth in subdivisions (1) to (12), inclusive, of subsection (b) of this
928 section. The advisory committee shall meet at least [quarterly]

929 semiannually.

930 Sec. 528. (NEW) (*Effective from passage*) (a) The Department of Public
931 Health shall, when conducting its annual survey of a nursing home
932 that has admitted a resident or residents who have been administered
933 a level two assessment, shall compare the services recommended for
934 any such resident in the level two assessment with the actual services
935 being provided to such resident as reflected in such resident's plan of
936 care. The department shall include the results of any such comparison,
937 as well as any regulatory violations found by the department during
938 an inspection, in the survey of such nursing home.

939 (b) A nursing home administrator, or a designee of the nursing
940 home administrator, shall notify the Department of Mental Health and
941 Addiction Services not later than fourteen days after the date of
942 admission of any individual who has been administered a level two
943 assessment which confirms a psychiatric diagnosis. Within available
944 appropriations, the department shall consult with the staff of a nursing
945 home concerning the status and discharge of those individuals who are
946 clients of the department. The department shall, within available
947 appropriations, protect to the fullest extent possible, the existing
948 housing of any client of the department, who is identified in a level
949 two assessment as being in need of a short-term admission to a nursing
950 home of ninety days or less.

951 Sec. 529. (*Effective from passage*) Notwithstanding the provisions of
952 section 19a-80 of the 2008 supplement to the general statutes, for the
953 period of time commencing with the effective date of this section to
954 June 30, 2009, inclusive, Solar Youth, Inc., a New Haven based
955 nonprofit youth development and environmental education
956 organization, shall be exempt from the licensure requirements
957 prescribed in said section.

958 Sec. 530. (*Effective from passage*) For the period of time commencing
959 with the effective date of this section to June 30, 2009, the
960 Commissioner of Public Health may enter into agreements with out-of-

961 state governmental agencies regarding training for asbestos and lead
962 abatement practitioners and consultants. Such agreements shall
963 establish criteria whereby training that has been approved by out-of-
964 state governmental agencies shall satisfy Department of Public Health
965 licensing and certification training requirements as relate to asbestos
966 and lead abatement practitioners and consultants.

967 Sec. 531. (NEW) (*Effective from passage*) (a) The Department of Public
968 Health shall permit a vendor, who the department previously
969 authorized to participate in the federal Special Supplemental Food
970 Program for Women, Infants and Children, but who was disqualified
971 from program participation during the period commencing on January
972 1, 2007, through the effective date of this section, due to the failure of
973 such vendor to: (1) File a complete application for continued
974 participation in the program, or (2) comply with the department's
975 prescribed minimum inventory requirements, to reapply for
976 reinstatement as an authorized vendor in the program. The
977 Department of Public Health shall, not later than thirty days from the
978 effective date of this section, provide written notification to vendors
979 who are permitted to reapply for program participation pursuant to
980 this section. A vendor receiving such notification from the department
981 shall have not more than thirty days after the date of notification to
982 reapply for continued participation in the program. A vendor who
983 reapplies for program participation pursuant to the provisions of this
984 section shall be notified in writing of the department's decision on the
985 application for reinstatement not later than sixty days following the
986 date of submission of the completed application.

987 (b) Any applicant who initially seeks to participate as a vendor in
988 the program and any authorized vendor currently participating in the
989 program who reapplies for continued participation in the program and
990 thereafter receives written notification from the department of a
991 deficiency in such application shall be afforded fifteen days from the
992 date of such notification by the department to cure such deficiency and
993 file a completed application. The provisions of this subsection shall not
994 apply to vendors who reapply for program participation pursuant to

995 subsection (a) of this section.

996 (c) The department shall not deny an application from a vendor
997 who initially seeks to participate in the program or an authorized
998 vendor, who is reapplying for continued participation in the program,
999 on the basis of minimum distance requirements between vendors in
1000 the geographic area for which the application or reapplication is made.

1001 (d) On and after the effective date of this section, if the Food and
1002 Nutrition Service of the United States Department of Agriculture
1003 conducts a comprehensive programmatic audit of the department's
1004 administration of the federal Special Supplemental Food Program for
1005 Women, Infants and Children and thereafter provides written
1006 notification to the department that the department's administration of
1007 the program is not in compliance with federal law and that the state
1008 may be subjected to financial penalties due to such noncompliance, the
1009 department shall take such action as the department deems necessary
1010 to ensure compliance with federal law, including suspension of the
1011 requirements prescribed in subsections (a), (b) and (c) of this section.

1012 (e) Not later than January 1, 2009, the Department of Public Health
1013 shall submit to the Food and Nutrition Service of the United States
1014 Department of Agriculture a revised state plan concerning
1015 administration of the program that addresses all requirements
1016 prescribed in federal law and incorporates the vendor selection,
1017 notification and disqualification provisions set forth in this section.

1018 (f) Implementation of the provisions of this section shall be within
1019 available appropriations.

1020 Sec. 532. Section 17b-278a of the general statutes is repealed and the
1021 following is substituted in lieu thereof (*Effective July 1, 2008*):

1022 The Commissioner of Social Services shall amend the Medicaid state
1023 plan to provide coverage for treatment for smoking cessation ordered
1024 by a licensed healthcare professional who possesses valid and current
1025 state licensure to prescribe such drugs in accordance with a plan

1026 developed by the commissioner to provide smoking cessation services.
1027 The commissioner shall present such plan to the joint standing
1028 committees of the General Assembly having cognizance of matters
1029 relating to human services and appropriations by January 1, 2003, and,
1030 if such plan is approved by said committees and funding is provided
1031 in the budget for the fiscal year ending June 30, 2004, such plan shall
1032 be implemented on July 1, 2003. If the initial treatment provided to the
1033 patient for smoking cessation, as allowed by the plan, is not successful
1034 as determined by a licensed healthcare professional, all prescriptive
1035 options for smoking cessation shall be available to the patient."